

# COMMUNITY-BASED HEALTH AND DEVELOPMENT PROGRAMS



## Mobilizing and Building the Capacity of Communities

Comprehensive community-based health programs have demonstrated success in improving the health and well-being of the populations they serve, especially impoverished women and children. These programs are particularly cost-effective because unnecessary sickness and more costly hospital care are avoided with prevention and early detection at the community level. They address the root causes of ill health through integrated programs in education, livelihood support, and water and sanitation. By building local capacity, these programs are not only highly effective but also cost-effective, transformative, and sustainable.

## Model in Practice: The Comprehensive Rural Health Project (CRHP) – Jamkhed, India

### AT A GLANCE

#### Problem

- In low-resource communities, millions of children and their families suffer from preventable and treatable illnesses
- Social, cultural, and economic barriers limit the ability of communities to address health needs and access proven, cost-effective tools (e.g., vaccines)

#### Solution

- Using a community-based approach, CRHP empowers communities to transform themselves and tackle key health and development problems
- CRHP addresses the root causes of poor health through education and development programs linked to primary and secondary health facilities

#### How it works

- Village Health Workers and community groups mobilize local and outside resources to overcome barriers and promote social and behavioral change
- Community-level activities are integrated with Mobile Health Teams, clinics and the CRHP hospital, and development initiatives

#### Reach/Scale

- From the initial 30 villages in the early 1970s, the project has expanded to serve a population of over 500,000
- More than 25,000 health workers from around the world have been trained at the CRHP Training Institute, introducing this approach to over 170 countries

### COST PER IMPACT PROFILE\*

~\$45,000 to implement the approach for a village (average village size is 1,500 people)

#### Representative impacts:

- Near elimination of child malnutrition (e.g., 1% in CRHP villages, compared to 46% in rural India)
- Improved child survival: for every 1,000 live births, ~50 fewer infant deaths in CRHP villages compared to rural India overall despite being an impoverished region. The infant mortality rate in CRHP villages is 8 per 1,000 live births compared to 55 per 1,000 for rural India
- Improved maternal outcomes: In CRHP villages, more than 99% of pregnant women receive prenatal care and have safe deliveries. The resulting maternal mortality ratio (annual deaths due to pregnancy causes per 100,000 live births) is 50% less than India overall.
- Sustained improvement in key development indicators including food security, women's economic and social status, and clean water and sanitation

\*SEE FULL CASE STUDY FOR SOURCE OF DATA

